File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073



FOR INSTRUCTIONS, SEE BACK OF FORM CAMPAIGN DISCLOSURE BD.

SCLOSURF SLIBBARA DOS. DISCLOSURE SUMMARY PAGE 2008 OCT 20 AM 10: 19

COMMITTEE NAME (Must be same as on Statement of Orga	anization)	104	20 111113	
Appanoose County Republican Co	entral Committee		FORM	
IMPORTANT: Indicate by # type of committee you are reporting for: (1)Statewide/Legislative/Judge Standing for Retention Candidate ((4)County Central Committee (5)County Candidate (6)City Candi Subdivision Candidate (8)County PAC (9)City PAC (10)School 11)Local Ballot Issue	2)State PAC (3)State Party	al C (DR-2 (Rev. 07/2007) For Office Use On	
CANDIDATE COMMITTEES ONLY:			Comm. #	
Candidate Name	Political Party (if applicable)		Logged in	
			Scanned	
Office Sought	District (if Senate or House)		Audited	
			-	
Late reports are subject to possible civil and criminal penalties. Pu	rsuant to lowa Code sections 68B.32/ 641-647-2624 TELEPHONE	4(7) and	68A.401(3), the car	
LAMEUNG				
IAM FILING A <u>Election</u>	REPORT FOR (1) ELECTION	/(<u>2)N</u> OI	N-ELECTION YEA	vR.
(report date)	Indicate by	#		
CHECK IF AMENDMENT TO REPORT DATED	· ·	Local Co	ommittees, enter Date	e of Election
Check if this is final (termination) report and attack Netices			Damoose	
Check if this is final (termination) report and attach Notice of (You must continue to file reports until a DR-3 is filed.	Dissolution Form DR-3.	County 8	Local Committees, ection is held	enter County in
		WINCH EN	ection is neig	
STATEMENT OF CASH ON HAND				
CASH ON HAND at the beginning of the reporting period. (Tot				
committee. This amount MUST be the same as the cof the last reporting period or must be zero if this is fire	ash on hand at the end	\$	3820.1	()
ADD TOTAL MONEY TAKEN IN THIS PERIOD		•		
Schedule A: Cash Contributions total (Attach Schedu	le A) (*also see in-kind below)		200.0	n
Schedule F: Loans Received total (Attach Schedule F				
Schedule H: Total Sales of Campaign Property (Attac				
(Schedule H applies to Candidates' Comm				.41
	SUB-TOTAL	\$	4020.	10
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		•		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below\			
Schedule F: Loan Repayments total (Attach Schedule	F)		855. (
CASH ON HAND at the end of this reporting period (if first area				
CASH ON HAND at the end of this reporting period (if final repo	ort balance must be zero)	\$	3164.4	46
*UNPAID BILLS (From Schedule D - Attach Schedule D)		\$		
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedu	ule E)	\$)
*OUTSTANDING LOANS (From Schedule F - Attach Schedule		œ		
()	e F)	Ф		
ONSULTANT BREAKDOWN (Schedule G Attached?)	: F)		YES N	
	F)			
ONSULTANT BREAKDOWN (Schedule G Attached?)				

FOR INSTRUCTIONS, SEE EACK OF FORM

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANCIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PACICHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE ICWA ETHICS & CAMPAIGN DISCLOSURE BCARD.

SCHEDULE B (Rev. 09/97)	MCNETARY EXPENDITURES
	CK THIS BOX IF NDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Appanoose County Republican Central Committee

	CANDIDATE	NAME AND ADDRESS TO WHOM	PURPOSE	AMCUNT
DATE	1 (EXPENDITURE (Disbursement) WAS MADE	(DESCRIBE TRANSACTION)	EXPENDED
(MM/DD/YR)	AND PAC CHECK			
	NUMBER			
7/17/08	ID# 1369	Moravia Fall Festiv	al±	
	CK#	Moravia, lowa	Booth	\$ 40.00
7/23/08	ID# 1370	True Value		
	CK#	Centerville t , IA	Flag	16.04
	1 10 1			
8/16/08	3 ^{ID#} 1371	Indian Hills Commun	ity College	
	CK#	Ottumwa, lowa	Scholarship	400.00
9/11/08	ID# 1372	TrueValue	Flag	16.04
	CK#	Centerville, iowa	,	10.04
0/20/00	ID#]	:		
9/28/08	1373 C K #	Photo Shop Ottumwa, Iowa	Sign	103.79
		Jona I	for Headquarters	103.79
10/1/08	ID# 1374	Alliant	Headquarters	
20,2,00	CK#	Cedar Kapids, la	Light Bill	43.54
	104			
10/13/0	8 1375	Iowa Telèeom	Headquarters	1
·	CK#	Des Moines, lowa	Headquarters Telephone Bill	236.23
	ID#			
	CK#			
			SUB-TOTAL S	855/64

TOTAL (if last page of this schedule)

\$ 855,64

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule Hinstructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 56.6(3)(i).)

	7		7
P		-4	
MACE		OI.	-
3-			

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Person Pignan	SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS	
	CHECK THIS BOX IF AMENDING FORM		

COMMITTEE NAME (Must t	oe same as o	n Statement of Organ	nization)		
Appanoose	County	Republican	Central	Comm	ittee

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
<u>λ</u> ιΟ/3/(ID# ®K#	Bill Buss 402 E. Maple Centerville, lowa 52544		\$ 200.00	
	ID# CK#				
	ID#				
	ID#				
	CK#	•			
	CK#				
	CK#				
	CK#				
	ID# CK#		ļ		
	ID# CK#				
	ID# CK#				
			SUB-TOTAL		

TOTAL (if last page of this schedule)

\$ 200.0

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by mamage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule A)